

ROYAL BOROUGH OF NEW WINDSOR



ANNUAL REPORT  
OF  
MEDICAL OFFICER OF HEALTH

1967



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b30283942>



# ROYAL BOROUGH OF NEW WINDSOR



To The Mayor, Aldermen and Councillors  
of the Royal Borough of New Windsor.

The past 12 months have been rather emotional ones for the public health staff. For many months Mr. Barker suffered from illness which was known would preclude his returning to work but this was not admitted generally until shortly before his death.

It was not only the shortage of staff that was our concern but primarily the feeling for both Mr. & Mrs. Barker in the knowledge that his awaited retirement would never be enjoyed. He was one of the family in the department for so many years that even I find it difficult to recall our first meeting. He was an ideal Chief Public Health Inspector, respected by all and I am sure without a single enemy. Our thoughts are still with Mrs. Barker who we are glad to think is now settling in a new home in the north country of their origin.

We now welcome a well qualified and experienced successor in Mr. Holmes who has shown his understanding of the close relationship within the department and who has had to contend with his own difficulties in separation from his family due to the current difficulties of house sale and purchase.

Reference to the staff situation on page 4 will show that for much of the year the department was at half strength. Mr. Barker had his first admission to hospital early in September 1967.

I would not wish it to be thought that any serious lapse occurred in safeguarding the public health but obviously priorities left a backlog of important but less urgent work. Mr. Lincoln as Deputy maintained the continuity as one had every confidence he would. From November 1966 until March 1967 Mr. Barker and Mr. Lincoln were the only inspectors from an establishment of four, and when Mr. Barker became ill Mr. Lincoln had the responsibility of dealing with priorities and of integrating the new inspector into the work of the department. Having so successfully contended with the difficult circumstances in which he found himself it was not surprising that among those interviewed for the post of Chief Public Health Inspector, Mr. Lincoln stood out second only to the experience of Mr. Holmes whose appointment as C.P.H.I. once more placed the department at full establishment.



One must not forget the situation for the long established clerical staff and their adaptability to changes, and with continued tolerance and understanding I look forward to effective administration and more attention to certain work which because of shortage of staff over several years has had to take a lesser order of priority. It must however be said that earlier agreement to offer a higher salary to Public Health Inspectors, which had to be made in the end, would have left the department with fewer pressing problems at this moment.

The Maud, the Mallaby, the Sheldon and the Seebohm Reports - all these reports coming within a short space of time give tremendous source for thought. I have in the past two years referred to the need for great changes in administration of local government generally and the Health Service in particular. Perhaps at this stage, before having had time for deep consideration of the most recent of the reports, it might be imprudent to express too dogmatic views. It is encouraging, however, that particularly with the Sheldon Report many of its recommendations had already taken place before its publication, but some comment will be made in the body of the report on the continuing change in personal health services.

It will not be my intention in this report to offer more than is statutorily required in the way of statistics. Statistics give no indication of actual work done or of its relative importance. Records are essential but perhaps their main use is to those who compile them and in due course interpret or learn from them. It is important, therefore, that a record of visits made is kept for use within the department and as evidence at a later date when questions arise. I hope, therefore, to deal on a broad basis with items of current interest or concern in the knowledge that those who wish information on more routine matters will make this known. It is appreciated when members of the Council come to the department seeking information and guidance in subjects of their concern.

S.J. McCLATCHEY.

Medical Officer of Health.

As in the reports for the past 3 years statistics relate to the calendar year January to December 1967, but general comment is up to the time of writing in mid 1968.



PUBLIC HEALTH COMMITTEE

Chairman ... Councillor R.K.I. BARKER  
Vice-Chairman ... Councillor Mrs. M.C. STEVENS  
The Mayor ... Councillor J.C. DEACON

Members

Ald. A.J. Head                      Cllr. N.M. Hopkins  
Cllr. G.H. Adcock                  Cllr. W.H. Johnson  
Cllr. Mrs. A.E.M. Burn          Cllr. Miss P.M. King  
  
Cllr. Mrs. B. Smith

WINDSOR AREA SUB-COMMITTEE OF THE  
BERKSHIRE COUNTY HEALTH COMMITTEE

Chairman ... Cllr. R.K.I. BARKER  
Vice-Chairman ... Councillor Mrs. M.C. STEVENS

County Council Representatives

Cty. Cllr. F. Reynolds  
  
Cty. Cllr. G.B. Warner

Windsor Borough Council Members

All Members of the Public Health Committee

Co-opted Members

Miss G.D. Sinclair-Brown          Dr. K. Walter  
  
Mr. R. Coe

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

S. J. McCLATCHEY, M.B., B.Ch., B.A.O., D.P.H.

Chief Public Health Inspector

F. BARKER, C.S.I., Certified Meat Inspector  
(Died 23.11.67)

Deputy Chief Public Health Inspector

W. J. LINCOLN, C.S.I., Certified Meat Inspector

Public Health Inspectors

J. FORREST, C.S.I., Certified Meat Inspector  
(Commenced 14.3.67)

M.A. TRACY, C.S.I., Certified Meat Inspector  
(Commenced 23.10.67)

Pupil Public Health Inspector

K. C. POTTS

Health Visitors

Miss A. MELLUISH, S.R.N., S.C.M., H.V. Cert.

Mrs. J. M. M. KEEN, S.R.N., S.C.M., H.V. Cert.

Mrs. D. W. WOOLCOCK, S.R.N., S.C.M., H.V. Cert.

Mrs. M. A. HELE, S.R.N., S.C.M., H.V. Cert.

Miss D. GOODMAN, S.R.N., S.C.M., H.V. Cert.

Mrs. E. CHAPMAN, S.R.N., S.C.M., H.V. Cert.

Chief Clerk: Miss D. E. ROGERS

Clerical Staff

Miss R. C. HUNT.

Mrs. B. HALEY

Miss D. D. LUCAS

General Assistant: Mr. S. HOWARD



LIST of SESSIONS held in WINDSOR CLINICS

Clinic	Windsor	Dedworth
Immunisation and Vaccination	Monthly - fourth Wednesday a.m.	Monthly - second Wednesday a.m.
Child Health	Wednesday 2 - 4.30 p.m.	Thursday 2 - 4.30 p.m.
Mothercraft & Relaxation	Weekly by appointment	Weekly by appointment
Speech Therapy	Wednesday and Thursday morning	Tuesday morning
Hearing Assessment	-	Monthly - third Wednesday a.m.
Family Planning	Monday evening	Thursday morning
Cervical Cytology	Friday 2 - 4 p.m.	-
General Practitioners Clinics	Monthly - second Friday a.m.	First Wednesday and fourth Friday mornings in the month.
Meetings for County Staff	-	Wednesday afternoon



## HOUSING

The results of efforts some years ago in declaring a clearance area are now to be seen in the development rising on what was formerly the Denmark Street, South Place and Oxford Road district. This building will indeed supply a need and it is hoped will enhance the status of Windsor town centre. As such it is satisfying to know the modest part one played in the early stages and to laud the efforts of others from then until now when completion is near.

In the annual report many years ago reference was made to what was felt to be an unbalanced state of housing relative to the socio economic groups. The needs of lower economic groups is perhaps more apparent and so the demand for housing this group may be greater. Against this is the availability of land and the profit seeking land owner together with the private developer. One cannot envisage a time without a sizeable council house waiting list, not simply due to increasing resident population growing up but also due to the drift of new families into the town, and so council house building must continue. Comment having previously been made on the unbalanced housing relative to economic need it is now suggested that a reasonable balance has been arrived at and one is ever conscious of the limitations to Windsor's expansion in area unless the borough boundary is extended to the west and development there approved.

The last clearance area was made 4 years ago. It is now more difficult to justify demolition on the former "unfit for human habitation" grounds and one has more regard to "acceptable standards." In future public enquiries on clearance areas much more will be decided on structural and amenity grounds than on purely health grounds.

In maintaining or improving large numbers of properties in any area thought must be given not only to the cost of improving relative to present value but to the length of time for which such improvement will satisfy housing standards. One must try to guess what the situation might be like in 30 to 40 years time in assessing the merits of action now.

At the moment there is uncertainty regarding Prince Consort Cottages, which were recommended as the next area suitable for clearance. Maintaining structures of architectural or historic value is certainly to be approved but there is a limit to what is reasonable and now that "Victoriana" is a popular theme we are faced with attempts to preserve these buildings considered to be a model development but from the point of view of amenity are little better than those in previous clearance areas. Such preservationist efforts coupled with the very limited resources available to the architectural section of the Borough Engineer's Department are likely to affect an impartial judgement on the value of this estate to the Council.



There is a strong community spirit associated with Prince Consort Cottages but it is unlikely that residents will wish preservation and modest improvements on the grounds of historic or architectural value. Rents and rates will be the deciding factors. For the elderly, cost is not an unsurmountable item but for the young or middle aged who do not merit the social security benefits, the present low rentals will loom large in their decision.

The Council has a responsibility to the future as well as to individual groups at this time, so that what this particular community wishes is not necessarily the deciding factor any more than historic value. If the Council could acquire the properties at near site value much could be spent on improvements to provide reasonable homes at a modest figure. Something useable for perhaps 40 or 50 years would be the aim. One section is really not worth spending money on and in the long run complete redevelopment of the area seems the best decision.

#### FOOD & HYGIENE

The hygienic standard of most food in this country is of a high order but the weak points from producer to consumer are worth summarising again.

Imported foods are dependent for inspection in their country of origin though importers and Ministry representatives naturally are offered facilities in that country prior to placing a contract. Continual supervision however depends on the exporting country and much on the general standards of hygiene within that country. Indeed in some instances the standards are high throughout while in others special endeavours may have to be made in order to satisfy importers from this country. Governments dependent on large exports to Britain will tend to be helpful and importers here with a good name to preserve will be particular. The weaknesses however are the same as at home as lapses are most likely to occur when general standards are low. Some idea of the incidence of food poisoning throughout the world would be of interest but even in this highly organised country notification is far from complete, so worldwide statistics are worthless.

Sampling of batches at the port of entry is helpful. It is not an absolute guarantee naturally, but samples found unsatisfactory, particularly if numerous, call for reconsideration of the import. At once readers will recall suspicion on the Argentine for Typhoid in imported canned meat and on China relating to Paratyphoid in frozen eggs.



At home inspection at source is relatively easy while the handling, transport and wholesale storage give few problems. The next really weak link is in retailing and particularly in those foods with a short shelf life or those notorious for growth of organisms once infected.

It should be made clear here that many of the prosecutions for unfit food relate to their state of freshness rather than their danger to health. The real point is that unfitness for whatever reason shows up the human failure which if it occurs in one respect could occur again in another and so is a potential danger to health. Large organisations, conscious of preserving their good name, have very strict instructions for their staff and retail traders but in spite of this they are not infrequently involved in prosecutions. The Public Health Inspectors try to achieve their aims by education but prosecutions should be an accepted hazard to maintain vigilance by all those concerned in the production of food. It is easy to obtain co-operation from the intelligent executive of a large firm and from most shop, hotel and restaurant proprietors. They understand the importance. Those involved in the more menial tasks in the trade are difficult to educate and one feels dependent on the authority of the employer. There is also a tendency among the lower paid members in the trade, particularly in hotels, to move frequently from place to place. Their standards are low, sometimes because of their intellect, they resent correction and have no vocation.

A particular problem for the Public Health Inspector is the restaurant working on a shoestring when often because both of lack of funds and lack of space it is impossible in a short time to carry out all the works required. Not infrequently such an owner is unable to make a living from the restaurant, the sale of which only seems to attract another buyer also with limited means.

It would be unreasonable not to ask the public to accept its part in food hygiene. Thoughts may at once fly to handling of food that is not purchased or to dogs in food shops, but it should be understood that only certain types of food are a potential danger if infected. Infection is usually slight and unless given some suitable opportunity to multiply will create no trouble. It would be quite unnatural and really not desirable to have all foods sterile. Following infection one needs a suitable growing medium - the food - and the temperature for growth and multiplication. Prepared meats, cakes and cream mixtures are among the most common sources which, if kept around body temperature, are ideal for potential trouble resulting.

However, from the asthetic point of view, members of the public should avoid handling most foods unless selected for purchase although it is not felt this practice is extensive. As far as dogs are concerned in practice much depends on the type of shop and the size of dog as to whether it is possible to contaminate food but where possible one wishes to discourage the presence of dogs and indeed cats in shops.



Of considerable importance and help is immediate notification of complaints and confrontation of the management at the time. Too often the Health Department receives a letter some days later from a visitor to the town who may not even have complained at the time of the incident. Delay makes it almost impossible to obtain suitable samples and not complaining to the management allows for denial. The complainant must also be prepared to support the Health Department in court when necessary.

### NUISANCE AND PLANNING

It is easy to be wise after the event but numerous instances come to mind where the granting of planning permission without restriction can in time give rise to a grave nuisance.

What in the first instance may appear a simple and reasonable enterprise can, if intensified or carried on outside usual working hours, become an almost insoluble problem. The working of machinery in a shop on weekdays and during normal working hours may give little cause for complaint but if persistent on a Sunday evening can be a severe distraction to one's expected peace and rest at that time. The going to and fro of cars and customers from a shop in a basically residential area can be most disturbing outside normal working hours.

It is important therefore that planning permission should be granted subject to no inconvenience being caused to neighbours particularly in the evenings and at weekends. Too often appeal is made to the Public Health Department on the grounds of "nuisance." This term is often difficult to apply and only the most obvious relating to noise and smell stand a chance of being supported in a court of law. The planning authority has the ability more easily to enforce on amenity grounds but conditions should be clearly stated relating to any planning consent.

The other example is that of intensity and such a case arises with Lovejoy's Pig Farm just outside the Borough, the effluent of which causes at times the most unpleasant smells to those in the neighbourhood. In previous years it has been suggested that in a farming area certain farmyard smells should be acceptable but intensive farming to the extent of 2,000 pigs is, from this point of view, out of all reason. Restriction on planning permission might have avoided the trouble but the matter is currently under consideration between the officers of the Borough and those of the adjoining Cookham Rural District.

Manual control of the effluent by the farmer at the pig farm has recently prevented a repetition of surcharging from foul sewers in the Priors Road area. Additional Airwick apparatus appears to have obviated previously intermittent nuisance from smell.



### SEWAGE

For the moment sewage is being dealt with adequately but towards the end of 1967 a complete breakdown of sewage disposal at the works followed major pipe fractures between the sedimentation tanks and the filters. The entire flow had to be dealt with by portable pumps working 24 hours a day which was successful in avoiding any discharge into the River Thames.

While the sewage works are now working well one recalls the most unsatisfactory conditions of years ago prior to the modernisation. The situation when bad was then easily recognised but the present condition of the sewerage through the town is not so obvious to all. In the town centre repairs have been made to the main sewer which was built in about 1850 and in the section from Edward Square to Kings Road relining prevented collapses which might have occurred at any time. The view of the Borough Engineer is supported in that the main sewers need relief sewers to reduce the risk of surcharging in abnormally wet weather. Conditions with very heavy rainfall over a brief period were once considered so "exceptional" as to limit attempts to obviate the condition on future occasions. In the past few years experience shows that these conditions are not so exceptional and there is need for the improvement to the surface water sewerage system. Such matters should be considered as urgent and every priority given despite current financial restrictions. One cannot but feel apprehensive of the condition of many old sewers and despite the said financial restriction the Engineer's recommendations in this field are to be considered as urgent.

### REFUSE DISPOSAL

Many authorities are dependent on their neighbours, usually rural districts with facilities for tipping, to take their refuse but as in the case of tipping in gravel pits there is a limit to the number of years this can continue. It is therefore most welcome that the Borough of Slough is building a pulverisation plant at Chalvey and it is expected to transfer disposal there in 1969. Recently half the quantity of refuse collected has had to be taken to a privately operated tip at Gerrards Cross and, after the 31st March 1969, Egham U.D.C. will no longer accept refuse from this authority.



STATISTICS

Area (in acres) ... ..	4,616
Home Population (Registrar-General's Estimate mid year 1967) ... ..	29,920
Number of Inhabited Houses 1967 (estimated) ... ..	8,594
Rateable Value at 31st December, 1967 ... ..	£1,371,787
Sum represented by a Penny Rate (year ending 31.3.68) ..	£5,603

Causes of Death in the Borough during 1967

	<u>Male</u>	<u>Female</u>
Tuberculosis, respiratory ... ..	-	-
Tuberculosis, other ... ..	-	-
Malignant Neoplasm, Stomach ... ..	4	6
Lung, Bronchus ... ..	19	3
Breast ... ..	-	5
Uterus ... ..	-	4
Other Malignant & Lymphatic Neoplasms ... ..	15	18
Leukaemia, Aleukaemia ... ..	1	-
Diabetes ... ..	2	-
Vascular Lesions of Nervous System ... ..	10	18
Coronary Disease, Angina . ... ..	30	15
Hypertension with Heart Disease ... ..	-	2
Other Heart Disease ... ..	12	16
Other Circulatory Disease ... ..	3	14
Pneumonia ... ..	8	9
Bronchitis ... ..	9	4
Other Diseases of Respiratory System . ... ..	1	-
Ulcer of Stomach and Duodenum .. ... ..	-	1
Gastritis, Enteritis and Diarrhoea ... ..	-	1
Nephritis and Nephrosis .. ... ..	-	-
Hyperplasia of Prostate .. ... ..	-	-
Pregnancy, Childbirth, Abortion ... ..	-	-
Congenital Malformations . ... ..	1	2
Other Defined and Ill-Defined Diseases ... ..	13	11
Motor Vehicle Accidents .. ... ..	2	1
All Other Accidents ... ..	-	2
Suicide ... ..	-	3
	—	—
Totals ... ..	130	135
	===	===



Births

				<u>Live Births</u>		<u>Stillbirths</u>	
				<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
Total Births	...	...	...	280	259	4	2
Legitimate	...	...	...	263	238	4	1
Illegitimate	...	...	...	17	21	-	1

				<u>Windsor</u>	<u>England &amp; Wales</u>
Birth Rate per 1,000 population	...			18.0	17.7

Infant Deaths

				<u>Male</u>	<u>Female</u>
Total Deaths of Infants under 1 year	...			4	1
Legitimate	...	...	...	4	1
Illegitimate	..	...	...	-	-
Total Deaths of Infants under 4 weeks	...			4	-
Legitimate	...	...	...	4	-
Illegitimate	..	...	...	-	-

				<u>Windsor</u>	<u>England &amp; Wales</u>
Death Rate per 1,000 population	...	...	...	8.9	11.2
Infant Mortality Rate	...	...	...	9.3	18.3
Perinatal Mortality Rate (Stillbirths and deaths of infants under 1 week of age)				18.3	
Maternal Mortality Rate	...	...	...	Nil	



Infectious Disease Notifications

	Under 1 yr.	1 to 2	3 to 4	5 to 9	10 to 14	15 to 19	20 to 34	35 to 44	45 to 64	65 and over	Total noti- fied.
Scarlet Fever	-	1	6	9	-	-	-	-	-	-	16
Measles	11	78	72	86	4	-	2	-	1	-	254
Whooping Cough	1	4	3	-	-	-	-	-	-	-	8
Food Poisoning	-	-	-	-	-	-	1	1	1	-	3

Tuberculosis

	New Cases			
	Respiratory		Non-Resp.	
	M	F	M	F
0 years	-	-	-	-
1 year	-	-	-	-
5 years	-	-	-	-
15 "	-	-	-	-
25 "	-	1	-	-
35 "	-	-	-	-
45 "	1	1	-	-
55 "	1	-	-	-
65 years & upwards	-	-	-	-
Totals	2	2	-	-

During the year there were reported 4 inward transfers, 3 outward transfers, 1 death and 5 recoveries, giving a total of 107 cases on the register at the end of 1967.



Maternity Services

		<u>No. of Windsor cases confined</u>
Hospital and Nursing Home Confinements	... ..	389
Home Confinements	... ..	150

Child Health Centres

Number of Births	... ..	539
Number of new attenders under 1 year of age	...	440
Number of new attenders between 1 - 5 years	...	53
Total number of attendances - Windsor	2228	
	Dedworth 2192	
	<hr/>	4420

Domestic Help Service

Number of part-time Domestic Helps employed at 31st December 1967	... ..	55
Number of cases served during the year	... ..	263
Number of hours worked ..	... ..	36,673

Of the 263 cases served, 9 were maternity cases.

Night Attendance Service

Number of cases served during the year	... ..	3
Number of hours worked ..	... ..	207



Immunisation

				<u>Triple Antigen</u>	
				<u>Primary</u>	<u>Booster</u>
Number aged 0 - 4 years (incl.)	...	...		307	349
Immunised by family doctors ..	...	...		197	151

In addition, booster doses are offered to all on entering school.

Vaccination against Smallpox

Number of children vaccinated aged 1 - 5 years .	...	297
" " " " " 5 -15 " .	...	2
Number of adults vaccinated ..	...	5
Vaccinated by family doctors (Children & Adults)	...	113

Poliomyelitis

				<u>Primary</u>	<u>Booster</u>
Total number immunised	...	...	...	589	364

The number of primary injections mainly relates to children under 1 year of age but a small proportion relates to older children who had not taken advantage of immunisation earlier.



## ENVIRONMENTAL HEALTH

### Inspection of the District

A much depleted staff by a tremendous effort involving much overtime working made 10,162 visits and inspections during the year as against 10,797 in 1966 and 12,187 in 1965. The 804 complaints received were more than in either of the two previous years and all had to be dealt with. The result of this was that many important duties such as hygiene control of food premises and new duties under the Offices, Shops & Railway Premises Act had to suffer. Nevertheless the remaining staff made every effort to cope with the situation and prevent any serious breakdown in the service.

### Housing

During the year 151 dwellings were inspected for housing defects under the Housing and Public Health Acts, and in 104 cases repairs were satisfactorily completed in consequence of informal action. In 21 cases Statutory notices were served.

Action continued to be taken to improve conditions in houses in multiple occupation by the enforcement of the Council's standards. The number in Windsor is not large and all of those known have been checked, in many cases after the position has been revealed by an inspection of the Register of Electors.

### Housing Acts (Financial Provisions) 1949 - 1958

Number of improvement grants approved     ...     ...     50

### Improvement Areas

Two housing improvement areas have been declared since the coming into force of the 1964 Housing Act, and the various necessary administrative steps have been taken. Unfortunately many of the tenants have declined to permit their homes to be modernised and suspended notices have had to be served. These have had the effect of deferring action for five years at the end of which time alternative accommodation has to be offered if the notices are to be enforced. It is extremely doubtful that this accommodation will be available in which case the notices will cease to have effect.

The principle of the value of the economic saving of sound houses has long been accepted and it is now being realised that the existing legislation to carry this out is inadequate. It is to be hoped that the proposed Housing Bill now going through Parliament will enable Councils to enforce the maintenance and improvement of suitable areas of property that are deteriorating and which can be saved economically from the more costly course of demolition and rebuilding.



Housing Act, 1957 - Part V - Provision of Housing Accommodation

Figures received from the Housing Manager show that the number of families rehoused by the Council during the year were as follows:

Rehoused from waiting list	...	...	...	46
Rehoused from condemned property	...	...	...	0
Rehoused from redevelopment area	...	...	...	12
Rehoused from Prefabricated Bungalows.	...	...	...	<u>18</u>
				76
				—

Families rehoused during 1966 numbered 137.

Rent Act, 1957

Number of Applications for Certificates of Disrepair..	...	...	...	...	...	2
---	-----	-----	-----	-----	-----	---

Rodent Control

780 premises were visited in the course of this work and 308 infestations were discovered and treated.

The town's sewers were inspected for rats in May and of the 80 test baits laid in the manholes most likely to be affected, only 5 were touched. Poison baits were then laid in these and surrounding manholes, virtually clearing rats from the sewers. The lightness of the sewer infestation shows that a careful and effective control has been exercised over the past years.

Health in Offices and Shops

169 visits were made to 431 premises registered under the Offices, Shops & Railway Premises Act, 1963, and a total of 384 contraventions revealed. Most of these visits were the first made under the new Act and this accounts for the large number of defects. These are being remedied satisfactorily on request and enforcement by legal proceedings has been unnecessary.

Of 14 accidents which were reported and investigated, 8 arose from falls. Employers were advised on safety measures and in a case of serious injury to a young person, a prosecution was taken and a fine of £20 with 5 guineas costs imposed.



Food Control

The following information is required by the Ministry of Health -

Bacteriological Examination

(a) Milk 10 out of 118 samples of milk taken were unsatisfactory. Most of these were from milk vending machines and bulk dispensers of milk drinks in restaurants where the milk had become contaminated by failure to thoroughly cleanse the storage and/or dispensing apparatus. Particular attention was paid to these machines and advice given which did effect an improvement. No examinations were made for the presence of brucella abortus.

(b) Ice-cream 66 samples of ice-cream were taken, mostly from businesses where ice-cream is scooped or served from a soft ice-cream dispenser, these providing by far the greatest risk of contamination. 24 of these samples failed to meet the recommended standard of bacterial cleanliness. Follow up visits with advice were made to the premises concerned until satisfactory results were obtained. By comparison there were few failures from packaged ice-cream.

(c) Liquid Egg (Pasteurisation) Regulations, 1963 There are no liquid egg pasteurisation plants in the borough. 2 samples were submitted to and passed the Alpha-Amylase test which indicates that the egg has been properly processed and rendered safe. No difficulties were found in administration of the Regulations.

Food Hygiene

Trade or Business	Number	Number to which Reg. 19 applies*	Number complying with Reg.16 /	Reg.19
Bakers & Confectioners	8	8	8	8
Butchers	17	17	17	17
Catering Establishments	50	50	50	50
Chemists	8	8	8	8
Cooked Meats	2	2	2	2
Fish Fryers	4	4	4	4
Fishmongers	4	4	4	4
Greengrocers	20	20	20	20
Grocers & General	49	43	49	43
Hotels	7	7	7	7
Public Houses	42	42	42	42
School Canteens	16	16	16	16
Sugar Confectioners	41	41	41	31
Wholesale Meat Depots	2	2	2	2
Wine Merchants	9	-	9	-
Works Canteens etc.	8	8	8	8
TOTALS	287	272	287	262

\* Premises which are required to provide a sink.

/ Premises where a wash basin is provided.



## Food Analysis

75 samples of a wide variety of foodstuffs and 8 samples of drugs were purchased at random from shops in the town and all were found by the Public Analyst to be genuine and up to at least a reasonable standard of quality.

## Unsound Food

15 cwts 52 lbs of meat and 19 cwts 40 lbs of other foodstuffs were condemned as being unfit for human consumption.

## CLEAN AIR ACT, 1956

Staff shortage again prevented the health department from presenting the Council with a programme for establishing Smoke Control Areas as approved by the Council and the Ministry of Housing and Local Government.

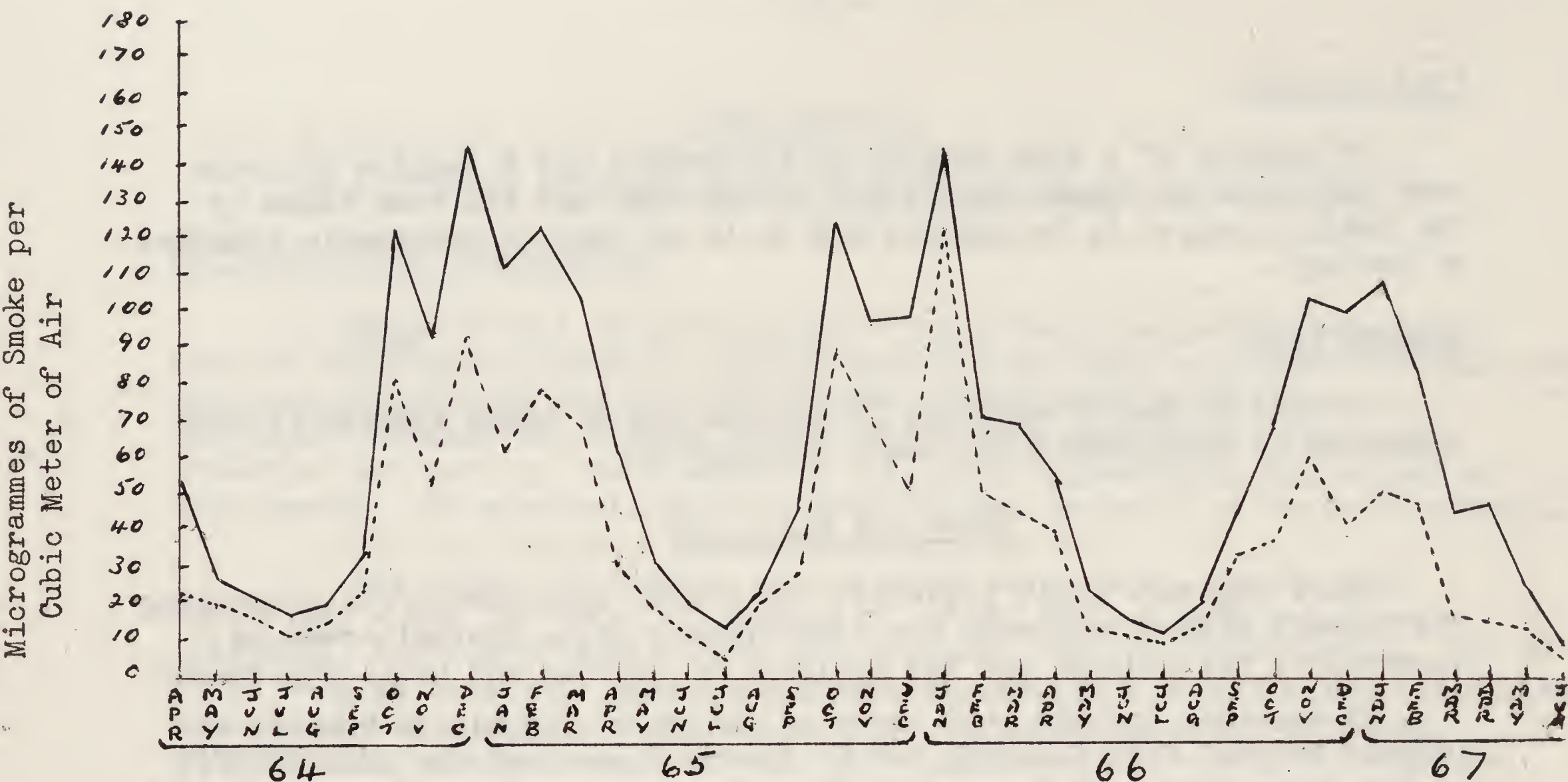
It was once thought that smoke pollution of the air we breathe was largely derived from industry but it is now known that the main culprit is the smoke from coal burning on domestic grates. This is poured out at roof top level and is, together with cigarette smoking, the killer that is primarily concerned in the deaths from bronchitis of well over 20,000 people each year in this country and incapacitation and misery to many thousands more. (Professor Lawther, 1967)

The graphs on the following pages illustrate the gain in clean air which can be expected from Smoke Control Areas where coal may not be burned. The Windsor smoke graphs show that the air around St. Leonards Road recording site, near the Public Library, is very much dirtier than the air around Smiths Lane. The former is in the older part of the town where much coal is burned. The latter is in the midst of more recent development where modern grates capable of burning smokeless fuel effectively have been installed and where the use of smokeless fuel is more common. The level of pollution here is similar to that in the Slough Smoke Control Area where coal may not be burned whereas the heavier pollution of the St. Leonards Road site is akin to that of the Slough District which has not yet been made smokeless. In both of these latter areas and others like them the prohibition of smoke from coal burning on ordinary fire grates will result in cleaner air and even in areas like Smiths Lane there should be an improvement.

The Sulphur Dioxide graphs show that this particular pollutant is not reduced by the burning of smokeless fuels. Removal from fuel is at present totally uneconomic though it can be avoided by the use of gas or electricity. Medical evidence fortunately shows that Sulphur Dioxide in the amounts found is relatively harmless on its own. The lungs are damaged when it is taken in with other pollutants. Remove the tars, hydrocarbons and other dirty constituents of smoke and our air remains fit to breathe.

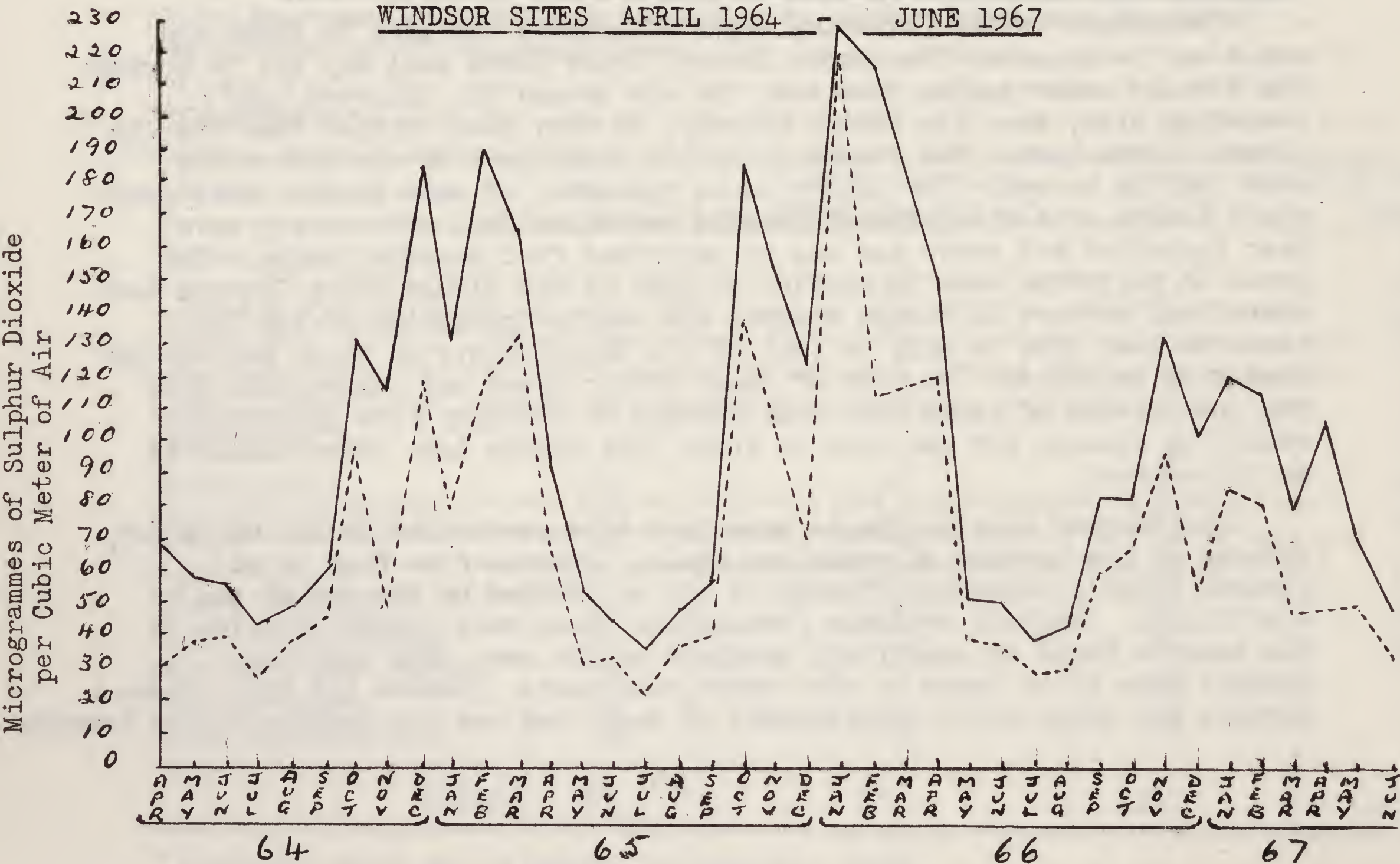


GRAPH No. 1 SMOKE POLLUTION MEASUREMENT FROM THE TWO WINDSOR SITES  
APRIL 1964 - JUNE 1967



\_\_\_\_\_ Windsor Station No. 1 - St. Leonards Road  
 - - - - - Windsor Station No. 2 - Smiths Lane

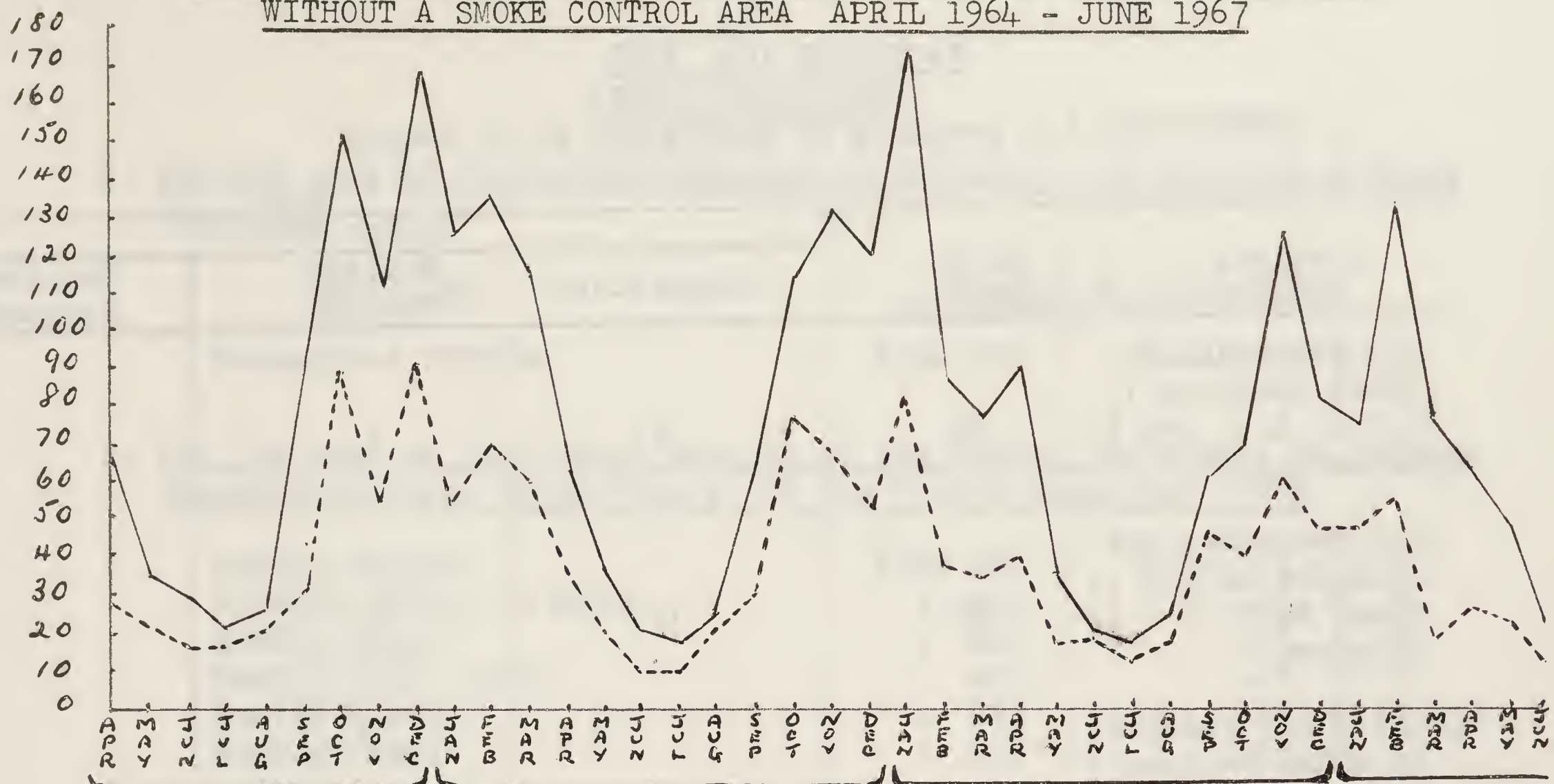
GRAPH No. 2 SULPHUR DIOXIDE POLLUTION MEASUREMENTS FROM THE TWO  
WINDSOR SITES APRIL 1964 - JUNE 1967



\_\_\_\_\_ Windsor Station No. 1 - St. Leonards Road  
 - - - - - Windsor Station No. 2 - Smiths Lane



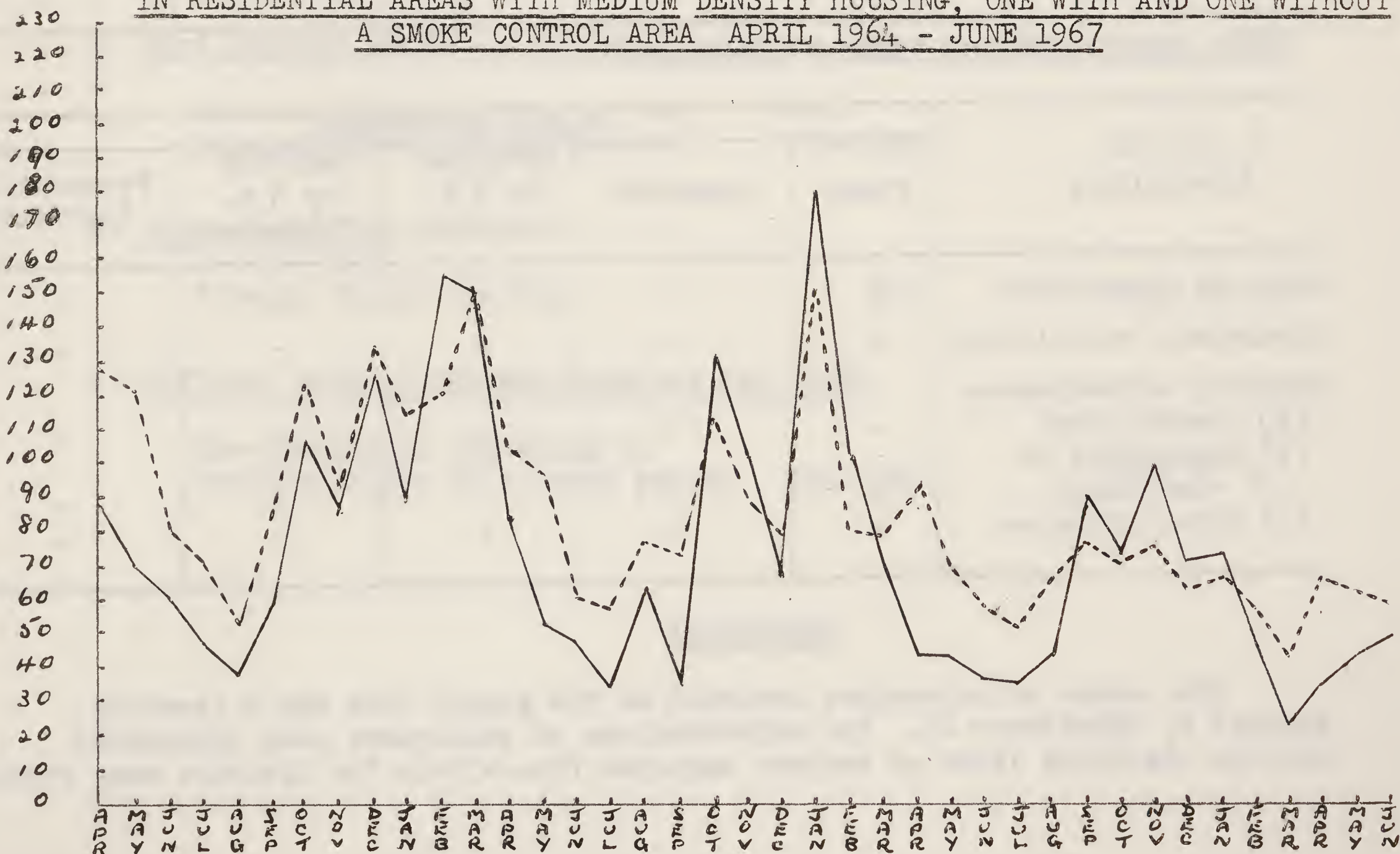
GRAPH No. 3 SMOKE POLLUTION MEASUREMENTS FROM TWO SLOUGH SITES IN RESIDENTIAL AREAS WITH MEDIUM DENSITY HOUSING, ONE WITH AND ONE WITHOUT A SMOKE CONTROL AREA APRIL 1964 - JUNE 1967



————— Slough Residential Area without Smoke Control Area

----- Slough Residential Area with Smoke Control Area

GRAPH No. 4 SULPHUR DIOXIDE POLLUTION MEASUREMENTS FROM TWO SLOUGH SITES IN RESIDENTIAL AREAS WITH MEDIUM DENSITY HOUSING, ONE WITH AND ONE WITHOUT A SMOKE CONTROL AREA APRIL 1964 - JUNE 1967



————— Slough Site without Smoke Control Area

----- Slough Site with Smoke Control Area



FACTORIES ACT, 1961

1. INSPECTIONS for purposes of provisions as to health

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which sections 1, 2, 3, 4, & 6, are to be enforced	26	2	1	-
(ii) Factories not included in (i) in which Section 7 is enforced	99	72	2	-
(iii) Other premises in which Section 7 is enforced (excluding outworkers' premises)	8	7	-	-
TOTAL	133	81	3	-

2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of Defects				
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	Prosecutions Instituted
Want of cleanliness	2	-	-	-	-
Inadequate ventilation	2	-	-	-	-
Sanitary conveniences					
(a) Insufficient	-	1	-	-	-
(b) Unsuitable or defective	2	-	-	-	-
(c) Other offences	-	-	-	-	-

Outworkers

The number of outworkers returned on the August list was 8 (wearing apparel 6, upholstery 2). No contraventions of employment were discovered and the statutory lists of workers employed from within the district were received.



LEGAL PROCEEDINGS

A. For the sale of Unfit Food contrary to Section 9, of the Food & Drugs Act, 1955

<u>Complaint</u>	<u>Result of Proceedings</u>	
Decomposed Chicken	Fine £10.	Costs £5. 5. 0.

B. For the sale of Food which was not of the nature, substance or quality demanded contrary to Section 2, of the Food & Drugs Act, 1955

Mouldy Faggots	Fine £20.	Costs £5. 5. 0.
Plastic Bottle in Milk	: £30	: £5. 5. 0.
Mouldy Bread	: £10	: £5. 5. 0.
Mouldy Apple Puffs	: £25	: £5. 5. 0.
Mouldy Bread	: £25	: £5. 5. 0.
Mouldy Bread	: £15	: £5. 5. 0.

C. Milk & Dairies Regulations, 1959

Dirty Milk Bottle	: £25	: £10.10. 0.
Dirty Milk Bottle	: £15	: £5. 5. 0.

D. Food Hygiene (Markets, Stalls & Delivery Vehicles) Regulations, 1966

Various Contraventions of the Regulations by a Food Hawker	Total Fine £26	: £10.10. 0.
--	-------------------	--------------

E. Shops Act, 1950

Illegal Sunday Trading	: £10	: £3. 3. 0.
------------------------	-------	-------------

F. Offices, Shops & Railway Premises Act, 1963

Non-compliance resulting in serious injury to a young person	Fine £20	: £5. 5. 0.
--	----------	-------------



MEMORANDUM

TO : THE SECRETARY OF DEFENSE  
FROM : THE SECRETARY OF THE ARMY  
SUBJECT: [Illegible]

1. [Illegible]  
2. [Illegible]  
3. [Illegible]

4. [Illegible]  
5. [Illegible]

[Illegible]	[Illegible]	[Illegible]	[Illegible]
[Illegible]	[Illegible]	[Illegible]	[Illegible]
[Illegible]	[Illegible]	[Illegible]	[Illegible]
[Illegible]	[Illegible]	[Illegible]	[Illegible]
[Illegible]	[Illegible]	[Illegible]	[Illegible]
[Illegible]	[Illegible]	[Illegible]	[Illegible]

6. [Illegible]  
7. [Illegible]

8. [Illegible]  
9. [Illegible]

10. [Illegible]  
11. [Illegible]

12. [Illegible]  
13. [Illegible]

14. [Illegible]  
15. [Illegible]

16. [Illegible]  
17. [Illegible]

18. [Illegible]  
19. [Illegible]

20. [Illegible]  
21. [Illegible]

22. [Illegible]  
23. [Illegible]

24. [Illegible]  
25. [Illegible]

26. [Illegible]  
27. [Illegible]







